

12.19.23, 12.20.23 & 12.21.23 | 10:00 AM - 2:00 PM

### At Empire State Plaza - Concourse Level

This annual, multi-day, holiday sale offers a variety of not-for-profit organizations an opportunity to promote and sell goods – on the indoor concourse at the Empire State Plaza. OGS-sponsored events, such as the Winter at the Plaza program, held at the Empire State Plaza, serve thousands of State employees and visitors and are intended to be family friendly.

- •Participation is restricted to Not-for-Profit Organizations only.
- •Ready-to-eat food is not permitted.

#### **APPLICATION DEADLINE IS 12/8/2023**

All applications that are submitted by the above listed deadline will be considered. Sending an application does not guarantee acceptance into the program. Here is how it works:

- Fully executed applications will be accepted on a first come, first served basis.
- Vendors will be notified via e-mail of their event participation.
- OGS reserves the right to extend deadlines.

Vendor Load in: 7:00 am - 10:00 am

#### For additional information please contact Diane Hems:

New York State Office of General Services, Convention & Cultural Events Tel 518.473.4756 • Diane.Hems@ogs.ny.gov



#### **Convention and Cultural Events**

Room 120, Concourse **Empire State Plaza** Albany, NY 12242

# Vendor Application: 2023 Community Holiday Fair

Instructions: Please complete this application for the Community Holiday Fair on December 19-21, 2023 from 10am - 2pm.

Business Information								
Business Name		Contact Name		Pho	ne	Email		
Business Address 1			I .		-	sell/distribute enh elated to health an	-	
Business Address 2								
City	State Z	ip						
Vehicle & Driver Information								
Will your vehicle fit in the V-Lot? (Must be 6ft, 6in or lower in height)	Yes No	•		ersize vehicle , 6in or highe		g in P-1N Lot?	Yes	No
Driver 1 Name (exactly as it appears on license)	Driver's License: Issued S	State & #		Licens	se Plate:	: Issued State & #		
Driver 2 Name (exactly as it appears on license)	Driver's License: Issued S	itate & #		Licens	se Plate:	: Issued State & #		
Permit Agreement								
The Permit Agreement, including the co and signs and insurance requirements, with the Vendor Application.			Please in	clude any ade	ditional i	information or que	stions in th	e space below:
<ul> <li>Download the Agreement: https://empirestateplaza.ny.gov/permit</li> <li>The Agreement is not applicable for N</li> <li>Vendors wishing to apply for an insura outlined in Item 12 of the Permit Agree</li> </ul>	YS Agencies. Ince waiver must meet th	e terms						
My permit agreement is already on	file							
My permit agreement is included w	rith this vendor applicati	on						
Options, Fees & Payment								
10'x15' Vendor Booth*				\$80	Total	\$		
Additional Tables (per table)			Qty	x \$5	Total:	\$		
Additional Parking (per space)			Qty	x \$10	Total:	\$		
Additional Chairs			Qty	no charge				
				Grand Total:	\$			
* A booth includes two tables, two chairs, responsibility for lost or damaged goods.								

Instructions: Return the completed Vendor Application with the following:

Payment in Full Any outstanding payment due to OGS may preclude participation. Payments may be made by check, money order or credit card and made payable to the NYS Office of General Services.

Proof of Not-for-Profit Status (if applicable)

Signed 2023-2024 Permit Agreement (if not already on file)

Please make checks or money orders payable to:

NYS Office of General Services

Return completed Vendor Application, Permit Agreement and Payment to:

diane.hems@ogs.ny.gov

event.



#### **Convention and Cultural Events**

Room 120, Concourse Empire State Plaza Albany, NY 12242

## **Credit Card Form**

**Instructions:** To pay with your credit card, please complete and return this form with your application.

Card Information	1					
Card Type				Business Name		
AMEX	Discover	MasterCard	VISA			
Cardholder First	Name			Cardholder Last Nan	1e	
Credit Card Num	ber (xxxx-xxxx-x	······································		Expiration Date	CVV2	Billing Zip Code
Charge Authoriz	ation					
		eneral Services to c	harge the	following amount for th	e event indicated	below.
Event Name					Aut	horized Amount
					\$	
Name (Print)					Dat	e
Signature						

For Office Use Only		
Invoice #	Program	Received By